

Boxes are provided to the right of each question. Only one box should be checked for each question asked. If you have any comments which you would like to make emphasizing the accuracy of the information or with reference to any information not generally covered in this format, please write them on the reverse of this page.

Response to TaskingResponses*

Does information provided satisfy your intelligence collection requirement?

YES IN PART NO

Accuracy

Geographical location (terrain, water, river, etc.)

YES IN PART NO

Large scale man-made objects (docks, silos, buildings, etc.)

YES IN PART NO

Small scale man-made objects (tanks, computers, antennas, etc.)

YES IN PART NO

Target ambience (research, production, administration, troop movement, etc.)

YES IN PART NO

Activity (nuclear testing, CBR, SIGINT monitoring, etc.)

YES IN PART NO

Personality (Physical, plans, actions, traits, etc.)

YES IN PART NO

Utility

Please check which best describes the utility of the information provided (in view of what is known at this time, understanding that additional information could raise or lower such an interim assessment at a later date)

- VERY USEFUL
- USEFUL
- MARGINAL
- NONE
- CANNOT BE DETERMINED AT THIS TIME

*YES - indicates a full agreement with what is known to be fact about the target. NO - indicates a total lack of agreement with what is known to be fact about the target.

Additional tasking

Is additional tasking required?
(If yes, please write what that tasking
is on the back of the form)

YES NO

Did the attached information add to
information derived from other intell-
igence sources?

YES NO

Did the attached information aid in tasking
other intelligence resources by providing
targeting information?

YES NO

Albert J. Bari

(Signed) SIGNATURE

ALBERT J. BARI, GS-13

(Printed) NAME, GRADE

ASST OPS OFFICER, USAOG

(Printed) TITLE, or OFFICE

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1. CUSTOMER OFFICE <i>USA09</i>		2. INFORMATION REQUESTED DATE		
		YEAR	MONTH	DAY
		<i>1980</i>		
3. TARGET COUNTRIES <i>IRAN</i>		4. PROJECT NUMBER <i>2130A</i>		5. SOURCE NUMBER <i>NFN 240317</i>
6. NUMBER REPORTS SUBMITTED FOR PROJECT		7. REPORT IDENTIFICATION NUMBERS		
8. REFERENCES		9. REASON FOR EVALUATION (select one)		
A. REQUIREMENTS (CITE) (ICR/CIR/DIRM 3/DIRM 9) <input type="checkbox"/> B. INITIATIVE REPORT <i>NA</i>		<input type="checkbox"/> A. ICR RESPONSE <input checked="" type="checkbox"/> B. COLLECTORS REQUEST, <input type="checkbox"/> C. SELECTED BY ANALYST		
10. VALUE OF INFORMATION (select one)		11. TYPES OF PRODUCTS TO BENEFIT FROM USE OF REPORTED INFORMATION		
<input type="checkbox"/> A. OF MAJOR SIGNIFICANCE <input checked="" type="checkbox"/> B. OF VALUE <input type="checkbox"/> C. OF NO VALUE		<input type="checkbox"/> A. BASIC INTELLIGENCE <input type="checkbox"/> B. CURRENT INTELLIGENCE <input checked="" type="checkbox"/> C. ESTIMATIVE INTELLIGENCE <input type="checkbox"/> D. S&T INTELLIGENCE		
12. REASON INFORMATION IS OF NO VALUE (select one only)		13. DEGREE OF REQUIREMENT SATISFACTION (select one only)		
<input checked="" type="checkbox"/> A. TOO FRAGMENTARY <input type="checkbox"/> B. DUPLICATIVE <input type="checkbox"/> C. UNTIMELY <input type="checkbox"/> D. NOT RESPONSIVE TO TASKING CITED		<input type="checkbox"/> A. COMPLETELY SATISFIED <input checked="" type="checkbox"/> B. PARTIALLY SATISFIED <input type="checkbox"/> C. NOT SATISFIED AT ALL		
14. NAME OF PRODUCT(S)				
15. COLLECTION GUIDANCE (Mandatory unless 13A, above, is checked)				
<i>Although this report tends to verify some of subjects activities, it lacks details that would more specifically identify subjects movements or activities. However, it is supportive of SG1A personnel tests or with information provided by subject</i> <div style="background-color: black; height: 20px; width: 100%; margin-top: 5px;"></div>				

SG1A

SG1A

observations relating to a controlled completed, closely relates to known facts and substantiates some of subjects reporting. He has also verified travel in a black car which correlates with information

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provided in this session. The last paragraph provides a similar circumstance that apparently was experienced by the (remarks continued) subject. He was in an sensitive environment; he was meeting with the people for information and at times using an assumed cover for action. This session provides support in verifying subjects presence in the target area; covering his assigned targets and conducting his actions in the manner that he had described. More detail could have greatly increased the value of this session.

17. FOREIGN DISCLOSURE DATA

A. EVALUATORS RECOMMENDATION
(select one only)

RELEASABLE EVALUATION NOT REQUESTED
 EVALUATION IS NOT RELEASABLE
 PARA(S) _____, ABOVE, IS/ARE
 RELEASABLE TO THE GOVT(S) OF _____

B. FOREIGN DISCLOSURE AUTHORITY DECISION
(select one only)

EVALUATION IS NOT RELEASABLE
 NON-CAVEATED PORTIONS OF THIS EVAL, AS
 INDICATED, MAY BE REL TO THE AUTH REPS
 OF THE GOVT(S) OF _____
 AT THE DISCRETION OF THE ORIGINATOR.

18. EVALUATOR'S NAME

ALBERT J. BARI

19. EVALUATOR'S OFFICE
SYMBOL

IAGPC-OP

20. SECURITY INSTRUCTIONS
(DOWNGRADING, DECLASSIFICATION,
AND SPECIAL MARKINGS)

21. DATE EVALUATED

22. ORIGINATOR OF REQUEST FOR INFORMATION

USAOG

YEAR	MONTH	DAY
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1981

JUNE 10

23. (Signature of evaluator)

Albert J. Bari

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